

UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)

10/518480

Charitta Burt, Paralegal

U. S. Application No. \_\_\_\_\_

Publication Date \_\_\_\_\_

Publication No. WO \_\_\_\_\_ / \_\_\_\_\_ PCT/RO/101 ☒

Copy of ISR AUX Copy of IPER AUX

Assignee information: \_\_\_\_\_

Priority Info: Country AU No. PS 3077 date 6.20.02 MORE (turn over)

Correspondence checked: \_\_\_\_\_

Inventor Name checked: F Vassili T L MIKHALTSEVITCH

Inventor Residence city: Perth, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT \_\_\_\_\_ / \_\_\_\_\_ Language \_\_\_\_\_

Copy of ISR: ☒

Copy in International Application: ☒; Translation: yes \_\_\_\_\_ no \_\_\_\_\_ spec. page no. \_\_\_\_\_

371 Filing Fees: 350; meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 15 Chargeable 15 Independent 5 multiple No

Number of drawing Sheets: 4 Foreign language: \_\_\_\_\_

Oath/Declaration: \_\_\_\_\_; signed \_\_\_\_\_ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed \_\_\_\_\_

Small entity fee: \_\_\_\_\_; SME papers: yes \_\_\_\_\_ no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

References \_\_\_\_\_,

Copy of IPER: \_\_\_\_\_; Annexes: \_\_\_\_\_ entered \_\_\_\_\_ not entered \_\_\_\_\_

Preliminary Amendment(s): ☒ date: 12.20.04; 2<sup>nd</sup> amendment date \_\_\_\_\_

IDS: \_\_\_\_\_ DATE: \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ DATE \_\_\_\_\_

Request for Immediate Examination: ☒

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: \_\_\_\_\_ forwarded to Assignment branch date: \_\_\_\_\_

Priority Document(s): ☒ date 12.20.05; Number of copies included \_\_\_\_\_

Power of Attorney: \_\_\_\_\_

Abstract: ☒, Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Date of 35 USC Receipt of Request: 12.20.04 Notes: \_\_\_\_\_

Date Completion USC 371 Requirements: \_\_\_\_\_

Notice of Missing Requirements: 7.9.05

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_; Petition 1.47: \_\_\_\_\_

Other forms: \_\_\_\_\_

Extension of time: Number of months \_\_\_\_\_

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